PTO

UTILITY
PATENT APPLICATION
TRANSMITTAL
(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	35.G2779
First Named Inv	entor or Application Identifier
TORU KIKUCHI	
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	, , , , , , , , , , , , , , , , , , , ,	E	xpress Mail L	abel No.			
See MPE	APPLICATION ELEMENTS EP chapter 600 concerning utility patent application con	tents.	ADDRE	ESS TO:	Box Paten	oner for Patents It Application on, DC 20231	
1.	Fee Transmittal Form (Submit an original, and a duplicate for fee processing)		7.	CD-ROM or Program (A	CD-R in duplicate	, large table or Co	mputer
2.	Applicant claims small entity status. See 37 CFR 1.27.		8.		and/or Amino Acid e, all necessary)	Sequence Submi	ssion
3. X	Specification Total Pages 49				Computer Readable		1.S. PTO
4. X	Drawing(s) (35 USC 113) Total Sheets 11			·——	ation Sequence Lis	-	28 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C 2 C
5. X	Oath or Declaration Total Pages 1			ii.	paper		
	a. X Newly executed (original or copy)				Statements verifying PANYING APPLIC	<del></del>	copies
	b. Copy from a prior application (37 CFR 1.63 (for continuation/divisional with Box 17 comple		9. X		Papers (cover sheet		
	i. <u>DELETION OF INVENTOR(S)</u> Signed Statement attached deleting		10.		s(b) Statement e is an assignee)	Power	of Attorney
	inventor(s) named in the prior applic 37 CFR 1.63(d)(2) and 1.33(b).	ation, see	11.	English Tra	nslation Document		
6. X	Application Data Sheet. See 37 CFR 1.76		12.		Disclosure (IDS)/PTO-1449	Copies Citation	s of IDS ns
			13.	Preliminary	Amendment		
			14. X		eipt Postcard (MPI specifically itemize		
			15.		opy of Priority Docu riority is claimed)	ument(s)	
<b>-</b> ∮			16	Other:		W-144	
17. If a	CONTINUING APPLICATION, check appropriate box a	and supply	the requisite	information:			
Prior app	Continuation Divisional Conditional Examiner	ntinuation-i	in-part (CIP)	of prior app Group/Art U	olication No/_		
considere	ITINUATION OR DIVISIONAL APPS only: The entire disclosed a part of the disclosure of the accompanying continuation	or divisiona	al application a	ınd is hereby i			
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X	Customer Number or Bar Code Label (Insert Custom		tach bar code	label here)	or Corres	pondence address I	pelow
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CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	24-20 =	4	X \$ 18.00 =	\$72.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	4-3 =	1	X \$ 80.00 =	\$80.00
	MULTIPLE DEPENDENT	T CLAIMS (if applicable) (37	CFR 1.16(d))	\$270.00 =	\$0
	San			BASIC FEE (37 CFR 1.16(a))	\$710.00
	The second of th		Total of	above Calculations =	\$862.00
1000	Reduction by	50% for filing by small er	tity (Note 37 CFR 1.9, 1	.27, 1.28).	0
				TOTAL =	\$862.00
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
NAME	Leonard P. Diana (Reg. No. 29,296)		
SIGNATURE	Lul P. Jan		
DATE	April 23, 2001		

Fees required under 37 CFR 1.17.

Fees required under 37 CFR 1.18.

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